

Section 2: 510(K) Summary of Safety and Effectiveness BioResorb® Macro Pore

JUL 1 5 2005

A. Submitters Information

Name:

Oraltronics Dental Implant Technology GmbH.

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Contact Person:

Dr. Greggory Cox

Date of Submission:

January 28, 2005

B. Device Name

BioResorb® Macro Pore

C. Predicate Device

Curasan Cersorb® Ortho, K014156, Curasan AG, Lindstrasse 4, Kleinostheim, Germany

D. Device Description

BioResorb® Macro Pore ß tricalcium phosphate is a synthetic, resorbable bone void filling material.

E. Intended Use

BioResorb® Macro Pore is to be used as a bone void filler device used in guided tissue regeneration, sinus lifts, ridge maintenance, alveolar socket preservation or ridge augmentation and the treatment of osseous defects.

F. Technological Characteristics

The proposed BioResorb® Macro Pore and the predicate device Cerasorb® are of identical composition and are intended for the same use. The technological characteristics of the materials used are exact to the predicate device.

G. Performance Data

BioResorb® is a ceramics powder of phase-three β-TCP. It is manufactured from pure laboratory chemicals. The contents of heavy metal according to ASTM 1088 (Standard specification for beta-TCP for implant surgery) are far below the permissible levels. BioResorb® has been used and marketed in Germany since 1988 with no adverse events. The safety and effectiveness of this material β-TCP in this application has been established.

The proposed BioResorb® Macro Pore device is substantially equivalent to the listed predicate device.

DEPARTMENT OF HEALTH & HUMAN SERVICES



JUL 1 5 2005

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Oraltronics Dental Implant Technology GMBH c/o Mr. Chad Bartee
Osteogenics Biomedical, Incorporated
3234 64th Street
Lubbock, Texas 79413

Re: K050260

Trade/Device Name: BioResorb® Macro Pore

Regulation Number: 21 CFR 872.3930

Regulation Name: Tricalcium phosphate granules for dental bone repair

Regulatory Class: II Product Code: LPK Dated: July 6, 2005 Received: July 7, 2005

Dear Mr. Bartee:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050. This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Chiu Lin, Ph.D.

Director

Division of Anesthesiology, General Hospital Infection Control and Dental Devices Office of Device Evaluation Center for Devices and

Michael ms.

Radiological Health

Enclosure

510 (K) Submission BioResorb® Macro Pore

510(k) Number (if known): <u>050260</u>		
Device Name: BioResorb® Macro Po	ore	
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Indications for Use:		
BioResorb® is to be used as a regeneration, sinus lifts, ridge a augmentation, and the treatment	maintenance, a	Iveolar socket preservation or ridge
Prescription UseX (Per 21 CFR 801.109)	OR	Over-the-Counter Use (21 CFR 801 Subpart C)
(PLEASE DO NOT WRITE BELOW TH	IIS LINE-CONTIN	UE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Kobert & Betz 1888 fro Dr. Susan Runner
Division Sian-Off (Division Sign-Off)

Division of Anesthesiology, General Hospital, Infection Control, Dental Devices

510(k) Number:___